

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE

Form approved.
Budget Bureau No. 1004-0137
Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> Other <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. 14-20-H62- 3503	
b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. REVR. <input type="checkbox"/> Other <input type="checkbox"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Ute Indian Tribe	
2. NAME OF OPERATOR Petroglyph Operating Company, Inc.		7. UNIT AGREEMENT NAME 14-20-H62-4650	
3. ADDRESS OF OPERATOR P.O. Box 1839 Hutchinson, KS 67504-1839		8. FARM OR LEASE NAME Ute Tribal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface NE SW 2187' FSL & 2011' FWL At top prod. interval reported below At total depth		9. WELL NO. 08-11	
14. PERMIT NO. 43-013-31677		DATE ISSUED	
15. DATE SPUDDED 7-16-96	16. DATE T.D. REACHED 7-23-96	17. DATE COMPL. (Ready to prod.) 8-7-96	18. ELEVATIONS (DF, RKB, RT, OR, ETC.)* 6008'
20. TOTAL DEPTH, MD & TVD 6232'	21. PLUG, BACK T.D., MD & TVD 6189'	22. IF MULTIPLE COMPL. HOW MANY*	23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Green River			25. WAS DIRECTIONAL SURVEY MADE
26. TYPE ELECTRIC AND OTHER LOGS RUN CNL, AIT 9-18-96			27. WAS WELL CORED
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8 5/8"	24#	260	12 1/4"
5 1/2"	15.5#	6233	7 7/8"
		CEMENTING RECORD	
		150 sx Class G	
		80 sx hilift, 325 sx 10-0 RFC	
		AMOUNT PULLED	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
			SCREEN (MD)
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2 7/8"	5707'		
31. PERFORATION RECORD (Interval, size and number)			
5693-98' (21 shots)			
5595-5600' (21 shots)			
4905-4921' (65 shots)			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH, INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
5693-98		4950 gal Gel + 16750# prop	
5595-5600		6480 gal Gel + 21600# prop	
4905-21		10250 gal Gel + 45125# prop	
33. PRODUCTION			
DATE FIRST PRODUCTION 10-17-96		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) 2 1/2" x 1 1/2" x 16' 40 ring PA	
DATE OF TEST 10-18-96		WELL STATUS (Producing or shut-in) producing	
HOURS TESTED 24	CHOKE SIZE	PROD'N. FOR TEST PERIOD OIL—BBL. 84	GAS—MCF. 0
FLOW, TUBING PRESS.	CASING PRESSURE 900	WATER—BBL. 13	GAS-OIL RATIO
CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.
			OIL GRAVITY-API (CORR.)
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) sold, used for fuel			
35. LIST OF ATTACHMENTS			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED <i>Angela R. Cey</i>		TITLE Administrative Operations Manager	
		DATE 10-25-96	

*(See Instructions and Spaces for Additional Data on Reverse Side)

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

37. SUMMARY OF POROUS ZONES: (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem, tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries):

38. GEOLOGIC MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
X Marker	4422					
Douglas Creek	4565					
B Limestone	4958					
Castle Peak	5502					
Basal Carbonate	5908					

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER _____		5. LEASE DESIGNATION AND SERIAL NUMBER: 1420H623507
2. NAME OF OPERATOR: PETROGLYPH OPERATING COMPANY, INC.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: UTE INDIAN TRIBE
3. ADDRESS OF OPERATOR: PO BOX 607 CITY ROOSEVELT STATE UT ZIP 84066		7. UNIT or CA AGREEMENT NAME: 1420H624650
PHONE NUMBER: (435) 722-2531		8. WELL NAME and NUMBER: UTE TRIBAL 08-11
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2187'FSL & 2011' FWL		9. API NUMBER: 4301331677
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: NESW 8 ⁵ TWS R3W		10. FIELD AND POOL, OR WILDCAT: ANTELOPE CREEK

COUNTY: DUCHESNE

STATE: UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input checked="" type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: _____ <input type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion: _____	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input checked="" type="checkbox"/> REPERFORATE CURRENT FORMATION
	<input type="checkbox"/> ALTER CASING	<input checked="" type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> OTHER: _____
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

This well is currently a producing oil well. Upon further research, Petroglyph Operating Company intends to do a recompleat in the Green River formation. Approximate start date is 8/15/2011. Petroglyph plans to perforate depths 4851'-4856', 4547'-4552', 4339'-4343', 4324'-4326', and 4209'-4214'. 8K composite plugs will be set for isolation for fracs: 4890' +/-, 4600' +/-, 4350' +/- Perforating guns: 3 1/8" Titan, 22.7 gram charges, 0.43" EDH, 23.54" TTP @ 4 spf @120* phased. Perforations will be fraced w/ 17# XL XLF gelled fluid w/ 20/40 mesh ramped sand. Isolation plugs will be drilled and production tubing will be run and placed back on production. Subsequent report to follow upon recompleat.

COPY SENT TO OPERATOR

Date: AUG 18 2011

Initials: KS

NAME (PLEASE PRINT) Leon Roush

TITLE Rig Supervisor

SIGNATURE

A.K. Boush

DATE 8/11/2011

(This space for State use only)

Accepted by the
Utah Division of
Oil, Gas and Mining
Date: 8/16/2011
By: *[Signature]*

Federal Approval Of This
Action Is Necessary

RECEIVED

AUG 15 2011

DIV. OF OIL, GAS & MINING

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

5. LEASE DESIGNATION AND SERIAL NUMBER:
14-20-H62-3507

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
Ute Indian Tribe

7. UNIT or CA AGREEMENT NAME:
14-20-H62-4650

8. WELL NAME and NUMBER:
Ute Tribal 08-11

9. API NUMBER:
4301331677

10. FIELD AND POOL, OR WILDCAT:
Antelope Creek

1. TYPE OF WELL
OIL WELL ☒ GAS WELL ☐ OTHER _____

2. NAME OF OPERATOR:
Petroglyph Operating Company Inc.

3. ADDRESS OF OPERATOR:
P.O. Box 607 CITY **Roosevelt** STATE **UT** ZIP **84066** PHONE NUMBER: **(435) 722-2531**

4. LOCATION OF WELL

FOOTAGES AT SURFACE: **2187' FSL, 2011' FWL**

COUNTY: **Duchesne**

QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: **NESW 8 5S 3W**

STATE: **UTAH**

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: _____	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
	<input type="checkbox"/> ALTER CASING	<input checked="" type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
<input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion: _____	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> OTHER: _____
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Petroglyph Operating moved in rig for re-complete on UT 08-11 on 9/13/2011. Petroglyph set an 8K Composite plug @ 4890' for isolation on lower zones. Perforated Green River formation and fraced. Perforated: C8.2 4851'-4856', C3.2 4547'-4552' @ 4 SPF @ 120* Phased. Fraced C8.2 and C3.2 with 717 Bbls Delta 140 15# Gelled fluid containing 20,900#'s 20/40 mesh sand 1-5#ppg ramp and 10,700#'s 20/40 mesh sand 5#ppg hold. Frac 100% placed. Set 8K Composite plug @ 4370', perforated green river formation: B10.2: 4339'-4343', 4324'-4326', B7.2: 4209'-4214' and fraced with 20/40 sand with 468 Bbls Delta 140 15# gelled fluid. 23,300#'s 1-5#ppg ramped and 20,240#'s 5#ppg hold. 100% placed. Tubing was ran and all plugs were cleaned out to PBTD 6263'. Production tbg was ran and swabbed till good oil sign obtained. Rod pump was ran and placed on production on 9/24/2011.

RECEIVED

SEP 30 2011

DIV. OF OIL, GAS & MINING

NAME (PLEASE PRINT) **Leon Roush**

TITLE **Rig Supervisor**

SIGNATURE

Leon Roush

DATE


9/27/2011

(This space for State use only)

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 3

AMENDED REPORT ☐

APPLICATION FOR PERMIT TO DRILL						1. WELL NAME and NUMBER Ute Tribal 08-10					
2. TYPE OF WORK DRILL NEW WELL <input checked="" type="checkbox"/> REENTER P&A WELL <input type="checkbox"/> DEEPEN WELL <input type="checkbox"/>						3. FIELD OR WILDCAT ANTELOPE CREEK					
4. TYPE OF WELL Oil Well Coalbed Methane Well: NO						5. UNIT or COMMUNITIZATION AGREEMENT NAME ANTELOPE CREEK					
6. NAME OF OPERATOR PETROGLYPH OPERATING CO						7. OPERATOR PHONE 208 685-7685					
8. ADDRESS OF OPERATOR 960 Broadway Avenue, Ste 500, Boise, ID, 83703						9. OPERATOR E-MAIL ppowell@pgei.com					
10. MINERAL LEASE NUMBER (FEDERAL, INDIAN, OR STATE) 1420H623507			11. MINERAL OWNERSHIP FEDERAL <input type="checkbox"/> INDIAN <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/>			12. SURFACE OWNERSHIP FEDERAL <input type="checkbox"/> INDIAN <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/>					
13. NAME OF SURFACE OWNER (if box 12 = 'fee')						14. SURFACE OWNER PHONE (if box 12 = 'fee')					
15. ADDRESS OF SURFACE OWNER (if box 12 = 'fee')						16. SURFACE OWNER E-MAIL (if box 12 = 'fee')					
17. INDIAN ALLOTTEE OR TRIBE NAME (if box 12 = 'INDIAN') Ute Indian Tribe			18. INTEND TO COMMINGLE PRODUCTION FROM MULTIPLE FORMATIONS YES <input type="checkbox"/> (Submit Commingling Application) NO <input checked="" type="checkbox"/>			19. SLANT VERTICAL <input type="checkbox"/> DIRECTIONAL <input checked="" type="checkbox"/> HORIZONTAL <input type="checkbox"/>					
20. LOCATION OF WELL		FOOTAGES		QTR-QTR	SECTION	TOWNSHIP		RANGE	MERIDIAN		
LOCATION AT SURFACE		1221 FSL 1493 FEL		SWSE	8	5.0 S		3.0 W	U		
Top of Uppermost Producing Zone		1980 FSL 1980 FEL		NWSE	8	5.0 S		3.0 W	U		
At Total Depth		1980 FSL 1980 FEL		NWSE	8	5.0 S		3.0 W	U		
21. COUNTY DUCHESNE				22. DISTANCE TO NEAREST LEASE LINE (Feet) 1221		23. NUMBER OF ACRES IN DRILLING UNIT 640					
				25. DISTANCE TO NEAREST WELL IN SAME POOL (Applied For Drilling or Completed) 1164		26. PROPOSED DEPTH MD: 6499 TVD: 6383					
27. ELEVATION - GROUND LEVEL 6220				28. BOND NUMBER LPM4138336		29. SOURCE OF DRILLING WATER / WATER RIGHTS APPROVAL NUMBER IF APPLICABLE 43-8342					
Hole, Casing, and Cement Information											
String	Hole Size	Casing Size	Length	Weight	Grade & Thread	Max Mud Wt.	Cement	Sacks	Yield	Weight	
Cond	20	14	0 - 53	5.0	Unknown	10.0	Class G	25	1.17	15.8	
Surf	12.25	8.625	0 - 493	24.0	J-55 ST&C	10.0	Class G	226	1.17	15.8	
Prod	7.875	5.5	0 - 6499	15.5	J-55 LT&C	10.0	Class G	500	1.92	12.5	
							Class G	345	1.46	13.4	
ATTACHMENTS											
VERIFY THE FOLLOWING ARE ATTACHED IN ACCORDANCE WITH THE UTAH OIL AND GAS CONSERVATION GENERAL RULES											
<input checked="" type="checkbox"/> WELL PLAT OR MAP PREPARED BY LICENSED SURVEYOR OR ENGINEER						<input checked="" type="checkbox"/> COMPLETE DRILLING PLAN					
<input type="checkbox"/> AFFIDAVIT OF STATUS OF SURFACE OWNER AGREEMENT (IF FEE SURFACE)						<input type="checkbox"/> FORM 5. IF OPERATOR IS OTHER THAN THE LEASE OWNER					
<input type="checkbox"/> DIRECTIONAL SURVEY PLAN (IF DIRECTIONALLY OR HORIZONTALLY DRILLED)						<input checked="" type="checkbox"/> TOPOGRAPHICAL MAP					
NAME Ed Trotter				TITLE Agent				PHONE 435 789-4120			
SIGNATURE				DATE 10/31/2013				EMAIL edtrotter@easilink.com			
API NUMBER ASSIGNED 43013526400000				APPROVAL <div style="text-align: center;">  Permit Manager </div>							

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: 1420H623507
1. TYPE OF WELL Oil Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: UTE
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO		7. UNIT or CA AGREEMENT NAME: ANTELOPE CREEK
3. ADDRESS OF OPERATOR: 960 Broadway Avenue, Ste 500 , Boise, ID, 83703		8. WELL NAME and NUMBER: Ute Tribal 08-10
4. LOCATION OF WELL FOOTAGES AT SURFACE: 1221 FSL 1493 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SWSE Section: 08 Township: 05.0S Range: 03.0W Meridian: U		9. API NUMBER: 43013526400000
PHONE NUMBER: 208 685-7685 Ext		9. FIELD and POOL or WILDCAT: ANTELOPE CREEK
COUNTY: DUCHESNE		STATE: UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> CASING REPAIR	
<input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion:	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> CHANGE WELL NAME	
<input checked="" type="checkbox"/> SPUD REPORT Date of Spud: 5/12/2014	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> CONVERT WELL TYPE	
<input type="checkbox"/> DRILLING REPORT Report Date:	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> NEW CONSTRUCTION	
	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> PLUG BACK	
	<input type="checkbox"/> PRODUCTION START OR RESUME	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION	
	<input type="checkbox"/> REPERFORATE CURRENT FORMATION	<input type="checkbox"/> SIDETRACK TO REPAIR WELL	<input type="checkbox"/> TEMPORARY ABANDON	
	<input type="checkbox"/> TUBING REPAIR	<input type="checkbox"/> VENT OR FLARE	<input type="checkbox"/> WATER DISPOSAL	
	<input type="checkbox"/> WATER SHUTOFF	<input type="checkbox"/> SI TA STATUS EXTENSION	<input type="checkbox"/> APD EXTENSION	
	<input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> OTHER	OTHER: <input style="width: 100px;" type="text"/>	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.
 This well was spud on 05/12/2014 at approximately 12:00 P.M. Using a Bucket Rig provided by Craig's Roustabout Service, Vernal Utah, we set 60' of 16" Conductor. For additional information please contact our staff at 435-722-2531.

Accepted by the
Utah Division of
Oil, Gas and Mining

FOR RECORD ONLY

May 15, 2014

NAME (PLEASE PRINT) Rodrigo Jurado	PHONE NUMBER 435 722-5302	TITLE Regulatory & Compliance Spc
SIGNATURE N/A	DATE 5/15/2014	

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9 5. LEASE DESIGNATION AND SERIAL NUMBER: 1420H623507			
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: UTE 7. UNIT or CA AGREEMENT NAME: ANTELOPE CREEK			
1. TYPE OF WELL Oil Well		8. WELL NAME and NUMBER: Ute Tribal 08-10			
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO		9. API NUMBER: 43013526400000			
3. ADDRESS OF OPERATOR: 960 Broadway Avenue, Ste 500, Boise, ID, 83703		9. FIELD and POOL or WILDCAT: ANTELOPE CREEK			
4. LOCATION OF WELL FOOTAGES AT SURFACE: 1221 FSL 1493 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SWSE Section: 08 Township: 05.0S Range: 03.0W Meridian: U		COUNTY: DUCHESNE STATE: UTAH			
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA					
TYPE OF SUBMISSION <input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 7/10/2014 <input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date:	TYPE OF ACTION <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/> </td> </tr> </table>		<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/>
<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/>			
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. Please see attached. <div style="text-align: right; margin-top: 20px;"> Accepted by the Utah Division of Oil, Gas and Mining Date: _____ By: <u>Derek Quist</u> </div>					
NAME (PLEASE PRINT) Rodrigo Jurado		PHONE NUMBER 435 722-5302			
SIGNATURE N/A		TITLE Regulatory & Compliance Spc DATE 7/7/2014			

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER _____		5. LEASE DESIGNATION AND SERIAL NUMBER 1420H623507
2. NAME OF OPERATOR Petroglyph Operating Company Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Ute Indian Tribe
3. ADDRESS OF OPERATOR P.O. Box 607 CITY Roosevelt STATE UT ZIP 84066		7. UNIT or CA AGREEMENT NAME 1420H624650
4. LOCATION OF WELL FOOTAGES AT SURFACE: 1221' FSL, 1493' FEL		8. WELL NAME and NUMBER Ute Tribal 08-10
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN SWSE 8 5S 3W U		9. API NUMBER 4301352640
COUNTY: Duchesne		10. FIELD AND POOL, OR WILDCAT Antelope Creek
STATE: UTAH		

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA			
TYPE OF SUBMISSION	TYPE OF ACTION		
<input checked="" type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: 7/10/2014	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
<input type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion:	<input type="checkbox"/> ALTER CASING	<input checked="" type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> OTHER: _____
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

On or around 7/10/2014, depending on equipment availability, Petroglyph Operating intends to perforate and fracture treat the following: 4899-4902, 4914-18, 4938-42, 4970-72, 4995-5000, 5097-5103, 5113-15, 5170-73, 5203-05, 5236-40, 5251-53, 5333-35, 5391-96, 5428-32, 5522-216, 5538-40, 5548-51, 5574-77, 5579-82, 5600-5603, 5610-14, 5629-31, 5638-42, 6017-021, 6067-70, 6139-42. We will perforate at 4 shot per foot and isolate zones using Halliburton 8K Composite Plugs. We plan complete the following stages:

6017-6142: 14,000 Gals of fluid containing 25,000#'s of sand,
5522-5642: 28,000 Gals of fluid containing 50,000#'s of sand,
5333-5432: 16,800 Gals of fluid containing 30,000#'s of sand,
5170-5253: 16,800 Gals of fluid containing 30,000#'s of sand,
5097-5115: 14,000 Gals of fluid containing 25,000#'s of sand,
4899-5000: 28,000 Gals of fluid containing 50,000#'s of sand.

This plan is tentative and will be adjusted as needed during completion operations. Volumes and amounts of sand are only estimates, actual figures will be reported at a later date. All plugs will be drilled out and the well swabbed if necessary.

NAME (PLEASE PRINT) <u>Rodrigo Jurado</u>	TITLE <u>Regulatory Compliance Specialist</u>
SIGNATURE 	DATE <u>7/7/2014</u>

(This space for State use only)

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: 1420H623507
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: UTE
1. TYPE OF WELL Oil Well		7. UNIT or CA AGREEMENT NAME: ANTELOPE CREEK
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO		8. WELL NAME and NUMBER: Ute Tribal 08-10
3. ADDRESS OF OPERATOR: 960 Broadway Avenue, Ste 500, Boise, ID, 83703		9. API NUMBER: 43013526400000
4. LOCATION OF WELL FOOTAGES AT SURFACE: 1221 FSL 1493 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SWSE Section: 08 Township: 05.0S Range: 03.0W Meridian: U		9. FIELD and POOL or WILDCAT: ANTELOPE CREEK
		COUNTY: DUCHESNE
		STATE: UTAH

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/>
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 8/30/2014			
<input type="checkbox"/> SPUD REPORT Date of Spud:			
<input type="checkbox"/> DRILLING REPORT Report Date:			

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Please see attached.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 November 19, 2014

NAME (PLEASE PRINT) Rodrigo Jurado	PHONE NUMBER 435 722-5302	TITLE Regulatory & Compliance Spc
SIGNATURE N/A	DATE 11/19/2014	

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER _____		5. LEASE DESIGNATION AND SERIAL NUMBER: 14-20-H62-3507
2. NAME OF OPERATOR: Petroglyph Operating Company Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Ute Indian Tribe
3. ADDRESS OF OPERATOR P.O. Box 607 CITY Roosevelt STATE UT ZIP 84066		7. UNIT or CA AGREEMENT NAME: 14-20-H62-4650
4. LOCATION OF WELL FOOTAGES AT SURFACE: 1221' FSL, 1493' FEL		8. WELL NAME and NUMBER: Ute Tribal 08-10
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: SWSE 8 5S 3W U		9. API NUMBER: 4301352640
COUNTY: Duchesne		10. FIELD AND POOL, OR WILDCAT: Antelope Creek
STATE: UTAH		

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: _____	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
	<input type="checkbox"/> ALTER CASING	<input checked="" type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
<input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion: 8/30/2014	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> OTHER: _____
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

On 7/2/2014 Petroglyph Operating ran GR/CBL and found ETOC @ 94'. On 7/11/2014 we then perforated the following: 4899-4902, 4914-18, 4938-42, 4970-72, 4995-5000, 5097-5103, 5113-15, 5170-73, 5203-05, 5236-40, 5251-53, 5333-35, 5391-96, 5428-32, 5522-26, 5538-40, 5548-51, 5574-77, 5579-82, 5600-03, 5610-14, 5629-31, 5638-42, 6017-21 & 6067-70. We isolated and fracture treated the following intervals:
 6,016'-6,142': 577 Bbbs of fluid containing 19,597#'s of sand,
 5,522'-5,642': 687 Bbbs of fluid containing 36,554#'s of sand,
 5,333'-5,432': 519 Bbbs of fluid containing 30,852#'s of sand,
 5,170'-5,253': 478 Bbbs of fluid containing 29,320#'s of sand,
 5,097'-5,115': 523 Bbbs of fluid containing 24,412#'s of sand,
 4,899'-5,000': 568 Bbbs of fluid containing 52,748#'s of sand.
 Isolation plugs used were Halliburton 8K Composite Plugs, fluid used was Delta 140 18# gelled fluid, sand used was 20/40 Mesh Premium White Sand and guns used were Titan 3-1/8", containing 22.7 gram charges, 0.42" EHD, 23.54" TTP @ 4 SPF @ 120* Phased. All plugs were drilled out and cleaned out to PBTD, 6,201'. The well was swabbed until a good oil cut was seen, then ran a pump on 8/30/2014 and put to pump.

NAME (PLEASE PRINT) Rodrigo Jurado TITLE Regulatory Compliance Specialist
 SIGNATURE  DATE 11/19/2014

(This space for State use only)

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: 1420H623507
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: UTE
1. TYPE OF WELL Oil Well		7. UNIT or CA AGREEMENT NAME: ANTELOPE CREEK
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO		8. WELL NAME and NUMBER: Ute Tribal 08-10
3. ADDRESS OF OPERATOR: 960 Broadway Avenue, Ste 500, Boise, ID, 83703		9. API NUMBER: 43013526400000
4. LOCATION OF WELL FOOTAGES AT SURFACE: 1221 FSL 1493 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SWSE Section: 08 Township: 05.0S Range: 03.0W Meridian: U		9. FIELD and POOL or WILDCAT: ANTELOPE CREEK
		COUNTY: DUCHESNE
		STATE: UTAH

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 8/26/2014	<input checked="" type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	OTHER: <input style="width: 100px;" type="text"/>	
<input type="checkbox"/> SPUD REPORT Date of Spud:			
<input type="checkbox"/> DRILLING REPORT Report Date:			

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The date of first production for this well was 08/26/2014.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 December 02, 2014

NAME (PLEASE PRINT) Rodrigo Jurado	PHONE NUMBER 435 722-5302	TITLE Regulatory & Compliance Spc
SIGNATURE N/A	DATE 12/1/2014	

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MININGAMENDED REPORT ☐ FORM 8
(highlight changes)

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL:		OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	DRY <input type="checkbox"/>	OTHER _____		
b. TYPE OF WORK:		NEW WELL <input checked="" type="checkbox"/>	HORIZ. LATS. <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	RE-ENTRY <input type="checkbox"/>	DIFF. RESVR <input type="checkbox"/>	OTHER _____
2. NAME OF OPERATOR: Petroglyph Operating Company, Inc.						5. LEASE DESIGNATION AND SERIAL NUMBER: 14-20-H62-3507	
3. ADDRESS OF OPERATOR: P.O. Box 607 CITY Roosevelt STATE UT ZIP 84066						6. IF INDIAN, ALLOTTEE OR TRIBE NAME Ute Indian Tribe	
4. LOCATION OF WELL (FOOTAGES) AT SURFACE: 1221' FSL, 1493' FEL AT TOP PRODUCING INTERVAL REPORTED BELOW: 1988' FSL, 1996' FEL NWSE Sec. 8 T5S R3W AT TOTAL DEPTH: 1979' FSL, 2009' FEL NWSE Sec. 8 T5S R3W						7. UNIT or CA AGREEMENT NAME 14-20-H62-4650	
10. FIELD AND POOL, OR WILDCAT Antelope Creek						8. WELL NAME and NUMBER: Ute Tribal 08-10	
11. QTR/QTR. SECTION, TOWNSHIP, RANGE, MERIDIAN: SWSE 8 5S 3W U						9. API NUMBER: 4301352640	
12. COUNTY Duchesne						13. STATE UTAH	

14. DATE SPURRED: 5/12/2014	15. DATE T.D. REACHED: 5/31/2014	16. DATE COMPLETED: 8/30/2014	ABANDONED <input type="checkbox"/>	READY TO PRODUCE <input checked="" type="checkbox"/>	17. ELEVATIONS (DF, RKB, RT, GL): 6,233' RKB
18. TOTAL DEPTH: MD 6,339 TVD 6,214	19. PLUG BACK T.D.: MD 6,214 TVD 6,090	20. IF MULTIPLE COMPLETIONS, HOW MANY? *		21. DEPTH BRIDGE MD PLUG SET: TVD	
22. TYPE ELECTRIC AND OTHER MECHANICAL LOGS RUN (Submit copy of each) ACTR, SDDSN, Cement Bond Log, Borehole Volume Plot				23. WAS WELL CORED? NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> (Submit analysis) WAS DST RUN? NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> (Submit report) DIRECTIONAL SURVEY? NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> (Submit copy)	

24. CASING AND LINER RECORD (Report all strings set in well)

HOLE SIZE	SIZE/GRADE	WEIGHT (#/ft.)	TOP (MD)	BOTTOM (MD)	STAGE CEMENTER DEPTH	CEMENT TYPE & NO. OF SACKS	SLURRY VOLUME (BBL)	CEMENT TOP **	AMOUNT PULLED
26	16 J-55	75	0	73				0	Conductor
12.25	8.625 J-55	24	0	523		G 330	68	0	
7.875	5.5 J-55	15.5	0	6,325		G 920	245	94'	CBL

25. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
2.875	5,970							

26. PRODUCING INTERVALS

FORMATION NAME	TOP (MD)	BOTTOM (MD)	TOP (TVD)	BOTTOM (TVD)	INTERVAL (Top/Bot - MD)	SIZE	NO. HOLES	PERFORATION STATUS
(A) Green River	4,899	6,142	4,776	6,018	4,899 6,142	0.42	344	Open <input checked="" type="checkbox"/> Squeezed <input type="checkbox"/>
(B)								Open <input type="checkbox"/> Squeezed <input type="checkbox"/>
(C)								Open <input type="checkbox"/> Squeezed <input type="checkbox"/>
(D)								Open <input type="checkbox"/> Squeezed <input type="checkbox"/>

27. PERFORATION RECORD

28. ACID, FRACTURE, TREATMENT, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND TYPE OF MATERIAL
4,899'-6,142'	3,352 Bbls of Delta 140 18# Gelled Fluid Containing 193,483#'s of 20/40 Mesh Sand.

29. ENCLOSED ATTACHMENTS:

<input checked="" type="checkbox"/> ELECTRICAL/MECHANICAL LOGS	<input type="checkbox"/> GEOLOGIC REPORT	<input type="checkbox"/> DST REPORT	<input checked="" type="checkbox"/> DIRECTIONAL SURVEY
<input type="checkbox"/> SUNDRY NOTICE FOR PLUGGING AND CEMENT VERIFICATION	<input type="checkbox"/> CORE ANALYSIS	<input checked="" type="checkbox"/> OTHER: DOGM Form 7	

30. WELL STATUS:

POW

31. INITIAL PRODUCTION

INTERVAL A (As shown in item #26)

DATE FIRST PRODUCED: 8/26/2014		TEST DATE: 9/24/2014		HOURS TESTED: 24		TEST PRODUCTION RATES: →	OIL – BBL: 89	GAS – MCF: 66	WATER – BBL: 100	PROD. METHOD: Rod Pump
CHOKE SIZE: 32/64	TBG. PRESS. 150	CSG. PRESS. 140	API GRAVITY 40.80	BTU – GAS 1	GAS/OIL RATIO 742	24 HR PRODUCTION RATES: →	OIL – BBL: 89	GAS – MCF: 66	WATER – BBL: 100	INTERVAL STATUS: Open

INTERVAL B (As shown in item #26)

DATE FIRST PRODUCED:		TEST DATE:		HOURS TESTED:		TEST PRODUCTION RATES: →	OIL – BBL:	GAS – MCF:	WATER – BBL:	PROD. METHOD:
CHOKE SIZE:	TBG. PRESS.	CSG. PRESS.	API GRAVITY	BTU – GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES: →	OIL – BBL:	GAS – MCF:	WATER – BBL:	INTERVAL STATUS:

INTERVAL C (As shown in item #26)

DATE FIRST PRODUCED:		TEST DATE:		HOURS TESTED:		TEST PRODUCTION RATES →	OIL – BBL:	GAS – MCF:	WATER – BBL:	PROD. METHOD:
CHOKE SIZE:	TBG. PRESS.	CSG. PRESS.	API GRAVITY	BTU – GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES →	OIL – BBL:	GAS – MCF:	WATER – BBL:	INTERVAL STATUS:

INTERVAL D (As shown in item #26)

DATE FIRST PRODUCED:		TEST DATE:		HOURS TESTED:		TEST PRODUCTION RATES →	OIL – BBL:	GAS – MCF:	WATER – BBL:	PROD. METHOD:
CHOKE SIZE:	TBG. PRESS.	CSG. PRESS.	API GRAVITY	BTU – GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES →	OIL – BBL:	GAS – MCF:	WATER – BBL:	INTERVAL STATUS:

32. DISPOSITION OF GAS (Sold, Used for Fuel, Vented, Etc.)

Used for Fuel

33. SUMMARY OF POROUS ZONES (Include Aquifers):

Show all important zones of porosity and contents thereof. Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

34. FORMATION (Log) MARKERS:

Formation	Top (MD)	Bottom (MD)	Descriptions, Contents, etc.	Name	Top (Measured Depth)
				Mahogany	3,115
				Lower Parachute Creek	3,453
				Garden Gulch	3,856
				Middle Garden Gulch	4,264
				Lower Garden Gulch	4,762
				Douglas Creek	4,906
				Lower Douglas Creek	5,304
				Castle Peak	5,845
				Utaland Butte	6,253
				Wasatch	

35. ADDITIONAL REMARKS (Include plugging procedure)

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.

NAME (PLEASE PRINT) Rodrigo JuradoTITLE Regulatory Compliance SpecialistSIGNATURE DATE 12/3/2014

This report must be submitted within 30 days of

- completing or plugging a new well
- reentering a previously plugged and abandoned well
- drilling horizontal laterals from an existing well bore
- significantly deepening an existing well bore below the previous bottom-hole depth
- recompleting to a different producing formation
- drilling hydrocarbon exploratory holes, such as core samples and stratigraphic tests

* ITEM 20: Show the number of completions if production is measured separately from two or more formations.

** ITEM 24: Cement Top – Show how reported top(s) of cement were determined (circulated (CIR), calculated (CAL), cement bond log (CBL), temperature survey (TS)).

Send to: Utah Division of Oil, Gas and Mining
1594 West North Temple, Suite 1210
Box 145801
Salt Lake City, Utah 84114-5801

Phone: 801-538-5340

Fax: 801-359-3940